In re application of:

Art Unit: 2142 Doo Sang Pak

Serial No: 09/844.821 Filed:

April 27, 2001

For: INFORMATION DISPLAY APPARATUS AND DISPLAY

METHOD OF THE SAME

Examiner: Ailes, Benjamin A. Confirmation No.: 3336

Attorney Docket; 2080-3-18

Mail Stop AF

Commissioner for Patents P. O. Box 1450

Alexandria, VA 22313-1450

Transmitted herewith is a Supplemental Amendment in the above-identified application.

Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed. A petition for extension of time for 2 month(s) is enclosed.

Request for Continued Examination is enclosed.

An information disclosure statement in accordance with 37 CFR 1.56 and 1.97 is enclosed.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*		LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	22	-	22		0	LG=\$50 SM=\$25	\$50	\$	0	
INDEPENDENT CLAIMS FEE	3		3	***	0	LG=\$200 SM=\$100	\$200	\$	0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$145								\$	0	
							TOTAL	\$	0	

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, write "20" in this space.

if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

Please apply the filing fee in the amount of \$ to Deposit Account No. 50229.

Please apply the extension fee of \$450 to Deposit Account No. 502290. Please apply the RCE filing fee of \$ 790 to Deposit Account No. 502290.

Please apply the IDS filing fee in the amount of \$_____ to Deposit Account No. 502290.

Please apply the petition fee in the amount of \$_____ to Deposit Account No. 502290.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 502290.

Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

Any patent application processing fees under 37 CFR 1.17.

Date: June 29, 2006 Respectfully submitted.

. HONG! DEGERMAN, KANG & SCHMADEKA

Customer No. 035884

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